

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY
(include Reference to PCT International Applications) PCT/FR99/02344ATTORNEY'S DOCKET NO
RN98132

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

DENTAL COMPOSITION BASED ON SILICONE CROSSLINKABLE BY CATION PROCESS

the specification of which (check only one item below):

☐ is attached hereto.☐ was filed as United States application

Serial No. _____

on _____

and was amended

on _____ (if applicable)

☒ was filed as PCT international applicationNumber PCT/ FR99/02344on October 1st, 1999

and amended under PCT /

on _____ (if applicable)

I hereby state that I have reviewed and approved by any amendment referred to above.

I acknowledge the duty to disclose information Code of Federal Regulations. §1.56(a).

I hereby claim foreign priority benefits under application(s) for patent or inventor's certificate the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

including the claims, as amended

in accordance with Title 37,

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY PCT indicate PCT	APPLICATION NUMBER	DATE OF FILING (day month year)	PRIORITY CLAIMED UNDER 35 USC 119	
FRANCE	98/12374	02 October, 1998	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> YES	<input type="checkbox"/> NO

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Continue) (include Reference to PCT International Applications) PCT/FR99/02344				ATTORNEY'S DOCKET NO RN98132	
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:					
PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120					
U.S. APPLICATIONS			STATUS (CHECK ONE)		
U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDONED	
PCT APPLICATIONS DESIGNATING THE U.S.					
PCT APPLICATION NO	PCT FILING DATE	US SERIAL NUMBERS ASSIGNED (if any)			
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney's and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith (List name and registration number) JOHN A. SHEDDEN - Reg. No. 25,644, Kevin McVEIGH - Reg. No. 33,017 JOHN D. WOOD - Reg. No. 31,146 JEAN-LOUIS SEUGNET - Limited Recognition under 37 CFR § 10.9(b) enclosed					
Send Correspondence to: JEAN-LOUIS SEUGNET INTELLECTUAL PROPERTY DEPT. RHODIA INC. 259 PROSPECT PLAINS ROAD, CN 7500, CRANBURY, NJ 08512-7500			Direct Telephone Calls to: <small>(name and telephone number)</small> JEAN-LOUIS SEUGNET (609) 860-4180		
201	FULL NAME OF INVENTOR	FAMILY NAME FRANCES	FIRST GIVEN Jean-Marc	SECOND GIVEN NAME	
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202	FULL NAME OF INVENTOR				
	RESIDENCE & CITIZENSHIP				
	POST OFFICE ADDRESS				
203	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.					
SIGNATURE OF INVENTOR 201		SIGNATURE OF INVENTOR 202		SIGNATURE OF INVENTOR 203	
DATE		DATE		DATE	